# Eastern MRS Meeting Notes June 28, 2007 WAGES Wayne County

<u>Counties Present</u>: Beaufort, Bladen, Brunswick, Duplin, Edgecombe, Greene, Halifax, Johnston, Nash, Person, Wayne, Wilson.

Introductions
News from Raleigh
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Recap Policy Discussion
Substance Abuse
When, How, Who
Tools

# News from Raleigh

#### Evaluation Issues

- Heather asked people to be on the lookout for a Dear County Director letter next week regarding data collection around Social Worker visits with Children in Foster Care.
- There is a federal mandate that we track these visits and how many of them take place in the child's residence.
- The decision has been make to track this through the MRS database. We will
  want it on all children in care as of July 1 of this year. This may require that
  counties go back and enter some older 210 information since the system will
  not allow 109 data to be entered for children until after the 210 information is
  entered.
- In addition to the DCD there will be an Administrative Letter that deals with this and the other recent updates to the MRS database. For more information after reading the letter they can contact Heather.

# MRS Institute – August 27-29 Asheville

- Hoping to have the brochure and registration come out this week.
- There will be sessions on Shared Parenting and Maintaining Connections in Foster Care, Cultural Diversity, Coaching Families, Substance Abuse, Domestic Violence (one of which will deal with how to work with offenders), Case Plans (how to develop them in CFTs) and how to use them with families, engagement: community partners, families, and staff, Combined WF and CPS case plans, relative care and working with relative caregivers, WF 101 for CPS workers, CPS 101 for WF workers, WF and CPS collaboration, working on an ethics presentation, Documentation, how one county implemented the DV policy, Financial Social Work (talking to CPS families about money issues).
- Day long seminars on Latino simulation, Poverty simulation, CFTs, Collaboration with CPS and WF.
- From DSS staff trainers: Solution focused therapy, SOC, True Colors (Joanne Scaturro), Humor in the Workplace.
- George Duvall former foster child that will do a session on fatherhood.
- Quan Bryant presented at the WF Conference.

- These will be presented by Staff Development, Counties, University Partners, and nationally known speakers.
- John Formica time and stress management.

# Recap of Policy Discussion from last month

Last month we talked about a lot of policy. When we rolled MRS into Chapter 8 and realized there were some areas there were some areas that needed clarification. Asked people for input at all three meetings last month. The following is a summary of the meetings as a whole. (New conversations from this meeting also included.)

When we seek input at these meetings, Holly writes a summary of the discussion and the policy team will take it into account when they discuss

# **Stopping Family Assessments**

- The biggest thing that came out of this was that this was a policy that was very rarely used.
- Doing a good job at intake is important; it was possible that this policy was
  used in circumstances where if intake were tighter the report would not have
  been accepted in the first place.
- Discussed back and forth reporting from separated and divorcing parents.
   Some counties have used CFTs to deal with this because the policy is not appropriate for these types of reports.
- Question about would you complete a 5104 and Case Decision Summary if you stopped the assessment.
- Felt that using this did not give a family closure.
- Hard to feel 100% confident that it was ok to use this policy.

# CFTs – is the policy clear? Is it enough?

- Perhaps some policy on how to document (counties say they are doing them but we do not see documentation of them.)
- Need to include CFT information in Foster Care policy.
- Need to strengthen the policy about actually dong the service plan at the CFT.
- When it is appropriate to collapse CFT and P-PAT.
- Pre-petition CFT would this place children at risk want to make sure that
  we protect children but don't have policy that allows staff to claim a safety
  threat and therefore not hold CFT.

## CFSR issues

- 210 policy is clear that you have to contact the father during the assessment, but it is not clear what has to happen after that. At the CFSR the feds were clear that they expected him to be involved throughout the case. Or at least for the DSS to make every reasonable effort to include him or his family.
- At all three meetings someone said that we would put mom in danger if we
  involved dad. There are certainly cases where that is true, but most of the
  time there is evidence already existing that he is dangerous if that is the case
  (police reports, etc). If it is true, document it, but we need to be sure that we
  are not using this as an excuse not to involve the other parent. Custodial
  parents may have their own agenda in not wanting the other parent involved.

 Even though the absent parent themselves may not be an appropriate placement, but some of the their extended family may be. Don't overlook these resources.

# New Discussion at this Meeting

- Policy says that everyone at the CFT gets a copy of the case plan. Counties feel that they are violating the confidentiality of the custodial parent in some cases.
- Need to consider that this is the case plan for the child. Need to be conscious
  of the confidentiality of the custodial parent, but also keep in mind this is for
  the good of the child.
- Some counties have a release form the custodial parent is asked to sign

# **Shared Parenting**

- First thing that needs to happen is to get this into Chapter 4 because it is not there yet.
- Since this meeting is supposed to happen within 7 days, usually the assessor or 215 worker still has the case because they are not always transferred that fast.
- Blended teams was pointed out as a good strategy for dealing with this issue so that the foster care worker had already been hearing about these cases so it was not brand new to them when the child came into care. Also, since the mindset of blended teams is that they cover for each other, the parent may have seen the foster care worker at some point in the life of the case management (foster care worker may have done a home visit to cover for the case management worker or something like that)

## New Discussion at this Meeting

- Success has to do with the presentation to Foster Parents and how we treat them.
- Need to focus on Shared Parenting now they way we focused on the dual track at the beginning.

## Services Recommended

- Really need clarification with which cases are Recommended and which ones are Provided
- Need clarification what to call it if you are recommending that they continue a service that was already in place.
- Clarification on the 7 day visit how are they getting the services you recommended? CFSR said we might need to help and support them a little to get those services in place. Need to document what you did when you talked with the family about the services.

#### Safe Surrender

- All of the ads imply that there will be no repercussions but the difference is legal repercussions, we will still do TPR. Just because they don't have to give their name does not mean we won't ask.
- Probably need to clarify to what extend we will go to find out who the parents are.

# Substance Abuse Issues

You have to report where an issue is substance abuse. What do we do, when do we ask parents to take drug screens, and to use substance abuse assessments – what triggers that?

- If a baby tests positive or drugs.
- If there is a history and the family keeps coming back.
- If the parent admits that they use drugs to a level that affects the children the worker will ask them to complete assessments. Also if they appear to be high.
- If the child tests positive for marijuana but they otherwise appear to be doing well – what do you do?
  - One county does moral turpitude if the child has ingested an illegal substance. It is one thing for an adult to make a choice to partake to illicit drugs, but for parent to expose a child to a substance to the extend that they register positive for the drug, the child has not had the opportunity to make a choice.
  - Often the parents agree because they don't think the drugs will show up.
- Only if it is can be shown that the level of the substance use is affecting the safety of the children.
- Some counties will ask for parent to participate in an assessment, and if that comes back ok, they have to unsubstantiated they can't force a drug test.
- Most counties screen out if the report is that parent does drugs unless there is an indication that it is having an impact on the child.
- If SA was an issue in the assessment, and the case goes to case management - do you put random drug tests in the case plan?
  - Yes, they just let them know that they will be doing this, because sometimes the family says they are using marijuana, but it turns out that they are using other drugs.
- If it does come back with other drugs but the child is cared for does it matter if they are using other drugs?
- What about if they refuse to take it? We can't make them and if they complete
  all the other pieces of the case plan we will have to close it so, if drug use is
  not causing a safety issue why put it in there.
- Does it matter where the information comes from? (Like an ex-boyfriend). No
- Prescription abuse this requires a different kind of test and are the hardest to show.
- Some counties routinely ask for them to complete the substance assessment so that they are covered.
- Holly said that the feeling is that we are doing too many of these using them as a CYA tool. Some counties agree that it is a CYA issue.
- Drug use does not equal abuse, nor does it mean a child is neglected and people need to understand that! We are not the moral police, or law enforcement.
- If the parent has been using for 10 or 20 years and we have never gotten a report before, what has changed now that there was a report?
- What about reports that are called in and the only issue that they can identify is that the person is going to the Methadone clinic?
  - o If there are not issues regarding the child it's a screen out.
  - o This is a form of treatment, so it might even been seen as a strength.

- Need to separate your personal feelings from our job does it affect the children – is there a safety issue here? Forget what you think personally about drugs and methadone.
- Must remember that by getting involved in a family's life where it is not necessary harms the family. Even if we unsubstantiate, we have called the teacher, the doctor, etc. and that can't be taken back. That has harmed those people's impression of the family.

## Tools

- Two years ago we made a CD that was compiled of tools that counties provided. We cannot put them on the MRS website, but the Director's Association will put the on their website.
- Nash & Brunswick brought tools.
- Want to update this information on the Director's Association website.
- Directors Association website = www.ncacdss.org
- Some of the things people have asked Holly for:
  - o CFT brochure, checklist for documentation
  - WF referral form
  - Letter templates
  - Diligent efforts

## Other Discussion

When you have young children left home alone – no harm at this point and mom just says she doesn't really know why she did it. 2 year old called 911. What do you do?

- First you need to figure out why more than her "I dunno".
- Talk to collaterals, neighbors, family members, etc.
- A million ways the case could go depending on the circumstances and why
  she did it.
- This is more common in the summer when kids are out of school.
  - Some parents think its ok, especially if they check on them periodically
     the families need some education.

When you are doing the Strengths and Needs Assessment and you identify 6 needs, how do you list them at the bottom of the form where it has 3 lines? Do you pick the top three or add lines and list them all.

- Some counties list the top three.
- Others list all of them but at the time that 215 services start they work with the family to identify the three highest priority and work on only three at a time.
- Some of those there is nothing you can do about i.e. if the caretaker was in foster care as a child you can't "do " anything about that at this point.
- The only time you would probably get in trouble if you only worked on three and there were more identified and you just picked three and didn't address the other ones, and they were critical to the family and were also needs that could have been addressed (not like the caretaker in foster care one.)

## Things we are thinking of for future meetings

Having folks hear from the trainers as to what is required when for workers.

- Domestic Violence folks talk about these issues how you work with the offender, what if both parents want to come to CFTs together.
- Other ideas? Send to Holly.

Future Meetings:

Central: July 16 Davie County Mocksville Library

Eastern: July 18 Edgecombe County

August: No Meetings due to the Institute

Eastern: September 26<sup>th</sup> - New Hanover